

## Sample Instructions on how to fill out the e-Signer affidavit:

The **e-Sign** affidavit is a legally binding document authorizing the applicant to sign and submit data and permit applications on behalf of an organization. The affidavit may differ depending on the WDEQ application access requested.

Please print or type. Submission of illegible materials will result in return of the affidavit to the applicant. The applicant should retain a copy of the affidavit for his or her records. Complete the checklists below to ensure your affidavit is approved. This Instructions page also serves as a checklist page.

- **Summary Checklist:**

- ☐ **Every line of the affidavit is filled-out. Sole proprietors should fill out each signature line on Pages 2-3.**
- ☐ **All signatures on the affidavit must be wet-ink, originals.**
- ☐ **All signatures must be notarized within the attest boxes.**
- ☐ **All pages (minus the instructions) must be mailed to the WDEQ. Fax or email is not acceptable.**

- **Page 1:**

- ☐ "STATE OF" and "COUNTY OF" refer to the State and County where the affidavit is notarized.
- ☐ The first and last name and the name of the company are prepopulated.
- ☐ This page is signed by the applicant and must be notarized.

- **Page 2:**

- ☐ This page is completed by company/government owners/representatives who are authorizing ENV-ITE users to sign on behalf of the company/government.
- ☐ Authorized Program, Name, Title (if available), Employed by/working on behalf of will be filled in automatically with the information provided in ENV-ITE.
- ☐ Address, Phone Number, and Email should be of the person who signs up to use ENV-ITE.
- ☐ The company/government representatives who are authorizing the applicant to sign and submit permit applications and data on behalf of the company / government entity need to have their names printed on this page as well as their organization. This process continues on Page 3.

- **Page 3:**

- ☐ Similar to the bottom of Page 2, the company/government representatives who are authorizing the applicant to sign and submit permit applications and data on behalf of the company/government entity need to have notarized signatures on this page.

If you have any questions or need further assistance please contact the application administrator:

eDMR Application Administrator: Kevin Campbell – [kevin.campbell@wyo.gov](mailto:kevin.campbell@wyo.gov); 307-777-2431

IMPACT Application Administrator: Zachary Mangin – [zachary.mangin@wyo.gov](mailto:zachary.mangin@wyo.gov); 307-777-6282

MIDAS Application Administrator: Carol Bilbrough – [carol.bilbrough@wyo.gov](mailto:carol.bilbrough@wyo.gov); 307-777-6772

WYPermitting Application Administrator: Leah Coleman – [leah.coleman@wyo.gov](mailto:leah.coleman@wyo.gov); 307-777-7093

## SAMPLE AFFIDAVIT OF E-SIGNER AND COMPANY AUTHORITY

STATE OF Refers to the State where is Affidavit is notarized

COUNTY OF Refers to the County where the Affidavit is notarized

I, **First and Last Name**, as an agent of **Company Name** having been first duly sworn on oath deposes and says:

I understand that the Wyoming Department of Environmental Quality ("DEQ") shall allow me to submit electronic documents to the ENV-ITE System under authorized programs in lieu of paper submissions.

I agree to protect my unique electronic signature device from compromise and from use by anyone except me. Specifically, I agree to maintain the secrecy of the password and PIN; I will not divulge or delegate my user name, password or PIN to any other individual; I will not store my password or PIN in an unprotected location; and I will not allow my password or PIN to be written into computer scripts to achieve automated login.

I agree to contact the DEQ ENV-ITE administrator at **wdeq.envite@wyo.gov** as soon as possible, but no later than 24 hours, after suspecting or determining that my user name, password and/or PIN have become lost, stolen or otherwise compromised.

I agree that I will review the contents of all electronic submissions prior to submission.

I understand and agree that I will be legally bound, obligated, or responsible by my use of my electronic signature, as I would be using my hand-written signature.

I understand that I will automatically receive an e-mail receipt from the DEQ's ENV-ITE System for any submission that contains a valid electronic signature, identifying the document received, the signatory, and the date and time of receipt.

I agree that I will contact the DEQ ENV-ITE Administrator if I do not receive an e-mail receipt as specified above within five (5) business days for any submission to the DEQ's ENV-ITE System.

I understand that I will have the opportunity to review the document submitted in a human-readable format and an opportunity to repudiate the electronic document based on this review.

I understand that the DEQ's ENV-ITE System will automatically reject any electronic document submitted without a valid electronic signature if such signature is required.

I understand that the DEQ may contact the Company Official(s) who signs below to authorize me as signatory for the company in order to verify my identity.

I agree to notify the DEQ ENV-ITE System Administrator if I cease to represent the regulated entity specified above as signatory as soon as this change in relationship occurs and I agree to retain a copy of this signed affidavit as long as I continue to represent the regulated entity specified above as signatory of the company's electronic submissions.

Signature: Signature of ENV-ITE account holder Print Name, Title and Date: \_\_\_\_\_

ATTEST

\_\_\_\_\_, \_\_\_\_\_ (Seal)  
Subscribed in my presence and sworn to before me this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_. Witness  
my hand and official seal:

My Commission Expires: \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_ Notary Public

I/We, Director; or Corporate Officer; or Mayor; or Elected Official as an agent of COMPANY NAME having been first duly sworn on oath deposes and says:

I/We, Director; or Corporate Officer; or Mayor; or Elected Official, assign the following person to e-sign electronic documents to the ENV-ITE System under authorized programs in lieu of paper submissions:

Authorized Program:	<u>EDMR</u>
Name:	<u>First and Last Name</u>
Title:	<u>Title</u>
Employed by or on behalf of:	<u>Company Name</u>
Address:	<u>Address of ENVITE account holder</u>
Phone:	<u>Phone Number</u>
e-mail (Required):	<u>eMail Address</u>

I/We understand that is my/our responsibility to notify WDEQ in the event of:

1. The login credentials of the assigned person has been compromised (or suspected to have been compromised)
2. A facility has been closed
3. Change in employment status of assigned person
4. Name change of the assigned person

**For corporations, non-profits, and LLCs:** The corporation or entity, acting through the officers whose signatures appear below, acknowledges and accepts legal responsibility for the accuracy and completeness of any submissions (permits, data, etc.). Any submissions that are e-signed by the submitter are the corporation's or entities legal responsibility.

**For governmental entities:** The governmental entity, acting through the officers whose signatures appear below, acknowledges and accepts legal responsibility for the accuracy and completeness of any submissions (permits, data, etc.). Any submissions that are e-signed by the submitter are the government entities legal responsibility.

**For partnerships and sole proprietorships:** I/we acknowledge and accept legal responsibility for the accuracy and completeness of any submissions (permits, data, etc.). Any submissions that are e-signed by the administrator submitter are my/our legal responsibility.

**Corporations, limited liability corporations, partnerships and governments require two individual signatures.** For partnerships, the signatures must be general partners. For governmental entities, the signatures must be elected officials or officers that have the lawful authority to bind the entity.

Sole proprietorships require only the owner's signature.

**ALL SIGNATURES MUST BE NOTARIZED.**

Signature: Signature of 1<sup>st</sup> official representative Print Name, Title and Date: \_\_\_\_\_

ATTEST

\_\_\_\_\_ (Seal)

Subscribed in my presence and sworn to before me this \_\_\_\_\_, day of \_\_\_\_\_, 20\_\_\_\_. Witness my hand and official seal:

My Commission Expires: \_\_\_\_\_

Notary Public

Signature: Signature of 2<sup>nd</sup> official representative Print Name, Title and Date: \_\_\_\_\_

ATTEST	
_____	(Seal)
Subscribed in my presence and sworn to before me this _____, day of _____, 20____. Witness my hand and official seal:	
My Commission Expires: _____	_____ Notary Public

Please mail this completed form to:

Wyoming Department of Environmental Quality  
ENVITE  
200 West 17<sup>th</sup> Street, 4<sup>th</sup> Floor  
Cheyenne, WY 82002

SAMPLE ONLY  
Not to be used for  
Submissions